Conflict of Interest - Declaration Form

I have read the Association's *Conflict of Interest Policy*, I agree to be bound by the obligations contained therein, and I commit to avoid any real or perceived conflict of interest. I also commit to disclosing the existence of any real or perceived conflict of interest to the Board, as soon as it is known to me.

I declare the following interests which may represent a potential conflicting interest:

Name	Signature	Date

Email completed form to info@saskarchery.ca